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<b>APPLICANTS</b> Michael Buschle, Brunn, AUSTRIA; Max Birnstiel, Wien, AUSTRIA; Walter Schmidt, Wien, AUSTRIA;					
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/EP99/00524 01/27/1999					
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 198 03 453.9 01/30/1998					
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 09/08/2000</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <input checked="" type="checkbox"/> Allowance Verified and <i>[Signature]</i> Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> AUSTRIA	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 1	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> Sterne kessler Goldstein & Fox Suite 600 1100 New York Avenue NW Washington ,DC 20005-3934					
<b>TITLE</b> Vaccine formulations					
<b>FILING FEE RECEIVED</b> 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		